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28 June 1982

WORLDWIDE REPORT

EPIDEMIOLOGY

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ARGENTINA

BRIEFS

HEPATITIS CASES--During the month of April 113 cases of hepatitis were recorded in the federal capital, as compared to 57 cases in March. The majority of the cases were reported by the municipal primary schools. [Buenos Aires CLARIN in Spanish 27 May 82 p 28 PY]

CSO: 5400/2169

VALE DO PARAIBA REPORTS 41 HEPATITIS CASES IN ONE MONTH

Paraiba Outbreak

Sao Paulo O ESTADO DE SAO PAULO in Portuguese 13 May 82 p 22

[Text] A new outbreak of hepatitis has been recorded in the Vale do Paraiba, this time in Cacapara Municipality, 11 kms from Sao Paulo via the Dutra highway. Pedro Shiavegatto, chief physician of the local health post, confirmed yesterday that 41 cases were diagnosed during April. He explained that the "primary cause is the indiscriminate use of water spigots or fountains by people who are not yet served by the SEBESP [Basic Sanitation Company of Sao Paulo State] distribution system.

Although Shiavegatto was reluctant yesterday to blame the water distributed by the state supply company, the published report confirmed that a large number of verified cases, 22 percent of the total, were residents of the city center, precisely where SABESP serves all the dwellings, both supplying piped water and collecting domestic sewage.

Shiavegatto vehemently disputed the theory that the hepatitis outbreak recorded early this year in Santa Branca (and still not under control) is fostering the spread of the disease to neighboring cities. The possibility was raised because Santa Branca is located "upriver" and its untreated sewage empties into the Paraiba River, while the "downstream" cities use this same river as their principal source of captation for the distribution of drinking water.

According to the chief of the health station, in the first place the river has a "self-purification" system, which insures treatment before the water is distributed to the public," with all bacteria completely eliminated. Moreover, the residential water distributed in Cacapava comes from artesian wells, "a fact which completely removes such a possibility, at least in this municipality."

Increase

According to a report drafted by the local health post, the hepatitis cases registered in the city were as follows: 2 confirmed cases in January, 2 more in February and 9 in March, rising to 41 in April. Shiavegatto explained that "we did not begin to collect notification of hepatitis cases from the physicians and diagnostic laboratories in the municipality until March, alerted by

the alarming indices observed in Santa Branca." He added: "When we ended the month with 41 cases, we immediately asked the Adolfo Lutz Institute to analyze the water and we strongly urged the municipal government to close the public spigots and fountains in the city."

However, Mayor Jose Miranda Campos decided to wait for the results of the analysis before taking any steps, believing such action would be "precipitous." "Therefore," Shiavegatto said, "the health post could only warn to people not to use the spigots and fountains for drinking water and to be careful about hygiene."

More Cases

Sao Paulo O ESTADO DE SAO PAULO in Portuguese 15 May 82 p 14

[Text] Another 13 hepatitis cases have been registered in Cacapava, in the Vale do Paraiba, bringing to 54 the number of patients in the municipality in the last 3 months. Yesterday Pedro Shiavegatto, chief physician of the local health center, hastened to "update" the figures he himself had released on Wednesday. Now, instead of 41 cases diagnosed in April, the health center official lists only 23. According to Shiavegatto, "the error was the result of duplications in notification; often the same case was reported three times." Even so, the physician admitted that "the hepatitis cases are still high for Cacapava, which has 45,000 inhabitants."

Reporting that this month the cases are averaging one per day, Shiavegatto added: "These figures refer only to patients brought into the health center." He warned: "The actual number of hepatitis cases should be much higher than the official figure."

6362

CSO: 5400/2161

DENGUE FEVER OUTBREAK IN RORAIMA CAPITAL REPORTED

Dengue Outbreak Discovered

Brasília CORREIO BRAZILIENSE in Portuguese 19 May 82 p 4

[Text] The Ministry of Health has registered an outbreak of dengue fever, with five confirmed cases, in Boa Vista, capital of Roraima, through the Health Secretariat of that city. Dengue is an acute fever characterized by an abrupt onset, a fever which lasts for an average of 5 days, with headache, pain in the joints and muscles and a rash which disappears 3 to 4 days after the onset of the fever.

The dengue fever virus is endemic in most tropical countries, the Caribbean islands and several countries in Central and South America. Epidemics can occur anywhere the vector is present--the *Aedes aegypti* mosquito, which also carried yellow fever. There are four types of dengue fever virus which are immunologically distinct (Group B of the togavirus). The last dengue fever epidemic in Brazil occurred in 1938.

To confirm that dengue had infected four people in Roraima, the local Health Secretariat sent blood samples to the Evandro Chagas Institute in Belem for laboratory diagnosis. Initially, medical officers in the area suspected rubella, since the clinical symptoms were compatible with this virus. Once the samples were processed, the examination was positive for arbovirus, with the dengue fever virus isolated in one of the cases. To combat the outbreak, the Health Ministry, through SUCAM [Superintendency of Public Health Campaigns], dispatched 5.5 tons of insecticides and 27 spray pumps to Boa Vista to combat the *Aedes aegypti* mosquito.

According to the Health Ministry, the disease is not transmitted directly from one person to another. Generally, patients can infect mosquitoes from one day before the appearance of the symptoms to the fifth day of the illness. The Health Ministry adds that the mosquito becomes infectious in 8 to 10 days after ingesting the blood of a patient and remains so for its life span. According to Health Minister Waldyr Arcoverde, this outbreak confirms various statements made by the Health Ministry here and abroad, on the need for an *Aedes aegypti* eradication policy in the country and on the continent.

Floods

A team of technicians from the Special Secretariat of Civil Defense of the Ministry of the Interior and SUDAM (Superintendency for the Development of the Amazon Region) [is in] Amazonas to verify the extent of the floods in the municipalities of Barreirinhas, Benjamin Constant, Borba, Cametama, Eirunepe, Humaita, Jurua, Maraa, Manicore, Novo Airao, Novo Aripuanã, Nhamunda, Parintins and Uricurituba, all in a state of emergency.

According to the minister of the interior, the planned measures are being adopted in these municipalities, such as provision of foods and tents to shelter the affected residents.

Level of Infestation

Sao Paulo O ESTADO DE SAO PAULO in Portuguese 23 May 82 p 16

[Text] Brasil's--Within a month SUCAM could assess the actual level of infestation of the *Aedes aegypti* mosquito in Boa Vista, Roraima. At the moment, according to Health Minister Waldyr Arcoverde, it is known that the level is quite high, and SUCAM is seeking to conduct a mosquito eradication program with immediate results.

The *Aedes aegypti* is the carrier of urban yellow fever and dengue fever. Last week it caused five cases of dengue fever, reinfesting a region where it has been absent for over 30 years. SUCAM has already begun an operation to capture the mosquito, assigning 10 more health officers to this duty, in addition to dusting the city of Boa Vista with the indicated insecticide.

The last outbreak of yellow fever in the country was recorded in Sena Madureira, Acre, in 1942. Although only cases of dengue fever have appeared so far, and not yellow fever, the technicians are very concerned about the presence of the *Aedes* mosquito. They feel the contamination is the result of the large movement of settlers and prospectors along the Brazilian borders with Venezuela and Guyana, without any particular control, breaking the epidemiological barrier.

6362

CSO: 5400/2161

MALARIA ATTACKS 190,000 IN 1981; OUTBREAK IN PORTO VELHO

Malaria Statistics

Rio de Janeiro JORNAL DO BRASIL in Portuguese 23 May 82 p 15

[Text] Brasilia--Over 190,000 people contracted malaria in Brazil in 1981, and a vaccine against the disease has yet to be discovered. Although practically restricted to Amazonia (only 6,600 cases occurred in other states), malaria is one of the major problems of the Superintendency of Public Health Campaigns [SUCAM] in combating endemic diseases.

Agostinho Cruz Marques, SUCAM director of program coordination, explained that malaria is a contagious disease transmitted by the Anopheles darlingi mosquito, provoking fever, chills, headaches and muscular pain. In Brazil the disease is directly related to the form of land occupation. "The population in the most recently settled areas, such as the gold fields, is most exposed to the disease," he said.

Foci

Outside Amazonia there are four foci of residual transmission, located in Goias, Mato Grosso do Sul, Parana and Santa Catarina, which accounted for 500 cases in 1981. With the number of cases decreasing, however, the situation is favorable for a complete interruption of endemic transmission beyond Amazonia. Cruz recalled that, at the end of the 1960's, there were still foci in cities like Manaus and Tefe, in Amazonas, but today malaria has already been conquered in the older settled areas. According to Cruz, the problem in Amazonia is one of very rapid settlement in scattered and distant areas; SUCAM's field teams do not have the flexibility to keep abreast of the process.

"Despite the problem of the lack of funds, SUCAM maintains almost 2,000 field workers in Para alone, counting lab technicians, insecticide spray teams to combat the carrier mosquito epidemiological monitors, inspectors and higher-level supervisors. It happens that the state has over 1,500 agricultural projects and more than 250 mining fields," Cruz explained.

In his opinion, the construction work on hydroelectric projects, railroads and highways attracts thousands of workers, and it is essential that the companies organize themselves to prevent workers who have contracted malaria from passing

it to the vector and hence to other workers. Economically, it is a good investment, he said, because a sick worker is incapacitated for at least 3 weeks, with mounting expense to the project.

"It would be cheaper to pay a lab technician to monitor the disease among the workers by means of blood tests. Every project in Amazonia should have a health officer, to prevent the occurrence of malaria epidemics in the country," he concluded.

Porto Velho

Sao Paulo O ESTADO DE SAO PAULO in Portuguese 13 May 82 p 22

[Text] SUCAM will apply burnt oil and other chemical substances on the mud flats left by the receding waters of the Madeira River. After experiencing the largest flood since the city was founded in 1907, inundating several districts of Porto Velho, the river could end by causing a massive malaria epidemic, a disease for which Rondonia has one of the highest indices in the world. The chemicals will combat the proliferation of the Anopheles mosquito which transmits malaria.

Health Officer Agostinho Haroldo Limeira de Araujo, regional director of SUCAM, announced that there is already a reinforced team for the preventive work of placing oil or chemicals on the mudholes where the Anopheles breed, but it will require assistance from other organs, such as the municipal government, for draining, land fill and other works in the districts affected by the flood, such as Triangulo, where the waters dislodged almost 200 families.

Although the number of malaria cases is still within normal range, SUCAM has initiated spraying with DDT in the districts of Triangulo, Reo, Areal, Mocambo and Arigolandia, all affected by the flood.

For his part, PM [Military Police] Maj Octavio Pinto, director of civil defense in the state, said materials are already being sent to the interior for preventive action. Some days ago an FAB [Brazilian Air Force] Buffalo carried 20 tons of DDT to Guajara-Mirim Municipio.

6362

CSO: 5400/2161

OVER 900 SCHISTOSOMIASIS CASES IN RIO DE JANEIRO IN 1981

Rio de Janeiro JORNAL DO BRASIL in Portuguese 24 May 82 p 2

[Article by Christiana Samarco]

[Text] Brasília--In 1981 more than 900 individuals contracted schistosomiasis in Rio de Janeiro, where isolated foci of the disease exist in Alto da Boa Vista, in Sumidouro, Duas Barras, Barra Mansa and Irai municipalities and in Pendotiba, located between Niteroi and Sao Goncalo. The information comes from Jose Evandro Machado Melo, chief epidemiologist of the Schistosomiasis Division of SUCAM [Superintendency of Public Health Campaigns].

There are already drugs, such as Mansil, which offer a 90-percent guarantee of curing schistosomiasis. Administered in a single dose, Mansil has no side effects and could bring the disease under control in the country. Even so, 8 million Brazilians were infected last year, according to SUCAM.

Transmission

According to Melo, schistosomiasis is essentially caused by poor basic sanitation or a lack of it. Transmission occurs in areas around rivers, irrigation ditches and lagoons which are inhabited by snails and contaminated with fecal matter from carriers of the worm *Schistosoma mansoni*. The schistosoma eggs passed in the feces of the carrier hatch on contact with water as larvae which develop and multiply in snails. They are released by the thousands in a new form--cercariae--which penetrate the skin of individuals who use these waters to bathe, wash clothes, fish and swim, attacking the liver, spleen, stomach and intestines.

In Brazil the endemic zone of schistosomiasis includes the entire coastline from Para to Sao Paulo, particularly the northeast, and Minas Gerais and Goias. To keep the disease under control, SUCAM maintains about 2,000 workers in the field. In Rio alone there are 25 endemic monitors, 30 lab technicians, 16 lab assistants, 7 drivers and 6 aides. According to Melo, this force is not adequate to cover the entire state. In addition to the lack of manpower, there is a shortage of funds, which limits the work, although last year SUCAM spent 750 million cruzeiros on the program to combat schistosomiasis.

SUCAM works at sanitary education, alerting the people to the cycle of transmission of the disease; it also works with the sanitation agencies, indicating endemic areas and immediate measures to be taken, such as construction of septic tanks, public fountains, lavatories and baths. In the specific case of Rio, the endemic zones are areas planted in watercress, which requires a special irrigation system that fosters the appearance of snails which transmit the disease. Although he is not in any pain, the patient is unfit for work because of generalized indisposition and apathy.

Melo stresses that the entry of schistosomiasis carriers in areas where there are transmitting snails can create a new endemic area in the country. For this reason, he says, it should be kept in mind that the disorganized occupation of land, with dense settlements in areas with no social facilities whatever, creates a strong possibility of the spread of schistosomiasis.

6362

CSO: 5400/2161

BRIEFS

MENINGITIS IN RONDONIA--In the last 30 days, five meningitis patients, residents of Porto Velho, have been admitted to the city's Hospital of Tropical Medicine. One of the victims, with the tubercular form of the disease, is considered the most serious case and remains under intensive care, according to Dr Raimundo Manes, director of the hospital. In the State Health Secretariat, no one will discuss the matter, saying they have been advised to make "no comment," although Dr Manes also said there is no epidemic, simply "isolated cases." Manes assured: "For now, everything is under control and there is no cause for alarm. The number of cases is within the expectations of the Health Secretariat, which has the necessary medicine available to cover this type of problem." Of the five cases appearing since April, one has not yet been verified, pending results of the laboratory examination, two cases are tubercular meningitis and two are "bacteriana" [aseptic] meningitis. Although the Hospital of Tropical Medicine is not the appropriate facility for these cases, patients are taken there because they must be isolated. [Text] [Sao Paulo O ESTADO DE SAO PAULO in Portuguese 19 May 82 p 13] 6362

SCHISTOSOMIASIS IN BRASILIA--A focus of schistosomiasis-carrying snails has been located in the city of Planaltina, next to Brasilia, and could offer a risk of the spread of the disease because the population in the area is expanding in the direction of the rivers where the snails are found. The information appears in a report by the National Council for Scientific and Technological Development (CNPq), regarding studies which indicate the need for disease control. All the Brazilian states except Rio Grande do Sul have schistosomiasis foci, but the areas of greatest concentration are the jungle area, the coastline of the northeast and the Vale do Rio Doce, in the interior of Minas Gerais, according to the report released yesterday by the CNPq. In its report, the CNPq announces the initiation of field experiments in biological control of the snails. Unlike the pesticides, which not only eliminate the snails but also some aquatic animal and vegetable life, says the council, the biological method of control acts only on the snails. [Text] [Sao Paulo O ESTADO DE SAO PAULO in Portuguese 15 May 82 p 14] 6362

CSO: 5400/2161

WARNING ISSUED ON VIRAL HEPATITIS

Rangoon THE WORKING PEOPLE'S DAILY in English 30 May 82 pp 1, 4

[Text]

RANGOON, 29 May—
The Health Department
issued a reminder in
connection with the
incidence of viral hepatitis.

In the reminder, it
is stated that reports
submitted to the Health
Department indicates
a slight increase in
incidence of viral hepatitis
in Rangoon this year.

The reminder also states
that signs and symptoms of
the disease include yellow
colouration of eye, skin
and urine, pain in abdo-
men due to enlargement
of liver, nausea and
vomiting loss of appetite,
and slight fever in a few
cases.

The virus which causes

the disease spreads through
unclean food and water
as well as through in-
sufficiently sterilised
syringes and needles.

Prevention of the
disease could be effected
through avoidance of food
contaminated by flies and
consumption of only
fresh and hygienic food,
washing hands before
eating and after toilet,
avoidance of injection with
improperly sterilised
syringes and needles, ab-
stinence of food from road-
side stalls and food and
drink prepared with ice.

Patients should seek
treatment at the nearest
Health centres.

CSO: 5400/5615

BRIEFS

GASTROENTERITIS, TYPHOID FEVER—Barranquilla, Colombia, 10 May (EFE)--Twenty children died and 200 are in serious condition as a result of gastroenteritis and typhoid fever in Fundacion, northern Colombia. Civic leader Hernan Gomez Pelaez reported this, noting that these epidemics are caused by a lack of potable water in this region, which is a traditional farming and cattle area. There is another gastroenteritis epidemic in Repelon, in Atlantico Department, but the health authorities there said that the necessary measures to prevent it from spreading have already been taken. [Madrid EFE in Spanish 0238 GMT 11 May 82 PA]

CSO: 5400/2169

SLOVAK CONTAGIOUS DISEASE SITUATION REPORTED

AU271853 Bratislava PRAVLA in Slovak 26 May 82 p 2

["JAR"-signed report: "Let Us Prevent Diseases Through Improved Hygiene; Favorable Development of the Epidemiological Situation in Slovakia"]

[Summary] Thanks to systematic measures, polio, diphtheria and whooping cough have been "virtually eliminated" in our country and typhoid fever "limited to sporadic cases." Other contagious diseases still occur, though our medical sector is achieving ever better results.

The epidemiological situation in Slovakia was the subject of yesterday's Bratislava press conference with S. Calpas, chief hygiene official of the Slovak Socialist Republic, and I. Masar, head of the Epidemiology Department at the Slovak Ministry of Health.

Vaccination against measles has shown positive results since its last occurrence was registered in Slovakia in February. This is a remarkable result, even by international standards. This year a vaccination campaign against German measles has started. It is administered to girls in the sixth grade of elementary schools.

This year's influenza epidemics, which occurred in February and March, hit 770,000 citizens, which was 425,000 less than last year. As regards intestinal contagious diseases, there is still a relatively frequent occurrence of salmonellosis caused by meat products and raw eggs. Last year there were 6,256 such cases. In the Liptovske Mikulas District, the contagion was caused by spoiled ham, in the Nitra District by poorly processed headcheese. Last year there were also 7,310 cases of dysentery, most of them caused by lack of hygiene in public swimming pools, and 4,696 cases of infectious jaundice. It must be considered a success that throughout 1981 there were only two cases each of tetanus and trachoma in Slovakia. ,

CSO: 5400/2169

NATIONAL BILHARZIA CAMPAIGN LAUNCHED

Cairo AL-JUMHURIYAH in Arabic 23 Mar 82 p 7

[Article by Nasrin 'Azab: "Dr Sabri Zaki: National Program To Fight Bilharzia; Reduction of Incidence to 11 Percent in Central Egypt"]

[Text] Minister of Health Dr Sabri Zaki announced yesterday that the national plan to combat bilharzia will cover the entire republic beginning this year and is the largest national campaign to combat bilharzia in the world.

The republic has been divided into 10 areas to combat the disease. These are Sinai, the Canal, the eastern, central, and western portions of the Delta, al-Giza, al-Fayyum, upper Egypt, central Egypt, and the High Dam Lake. The anti-bilharzia campaign has completely covered the area from al-Giza to Aswan and the incidence of the diseases has dropped from 30 percent to 11 percent.

In a visit to Bani Suwayf to open some health projects, Dr Sabri Zaki, who was accompanied by Governor Mahrus Abu Husayn, announced: "There is a general strategy to combat bilharzia at the national level based on calling in, examining, and treating the citizens and fighting the basic causes through a complete survey of the canals and remote drainage ditches in various areas of the republic--some 64,000 kilometers have been surveyed in central Egypt alone--and the application of a single oral dose for both types of bilharzia."

He announced that the plan in the central Delta and al-Nubariyah will begin next year with two plans: a short-term plan based on the treatment of students and members of labor communities and a long-term 5-year plan which includes west al-Nubariyah and the northern and western portions of the Delta.

He said that the International Housing and Development Bank participated in a loan consisting of \$22 million to fight Bilharzia in central Egypt and \$14 million for al-Giza. The African Development Fund agreed to participate with \$10 million for anti-bilharzia projects in the Delta.

He indicated that there had been a decrease in the rate of incidence of the disease from 30 percent to 11 percent in central Egypt, 17 percent in Aswan, and 9 percent in al-Fayyum.

He opened a first aid unit on the Bani Suwayf highway and a health unit in Tamsa which was constructed with a 3-million-mark grant from Finland.

8591

CSO: 5400/5010

BRIEFS

SCHISTOSOMIASIS RAVAGES--The Tongu women association has threatened to block the Lower Volta Bridge, if within six months nothing concrete is done to control Bilharzia in the area. The association claimed that for the past 17 years successive governments had only paid lip service to the control of the disease from which more than 80 percent of the inhabitants are suffering. This was contained in a welcome address by Mama Adokuwa Asigble IV, queen mother of the traditional area at a public meeting organised last Friday to discuss the bilharzia disease. The bridge, built in 1967, is on the international highway linking Ghana with the Ivory Coast and Togo. Mama Asigble asked for a special clinic in the area to control the disease. In an address read on his behalf, the Secretary for Health, Lieutenant-Colonel Twum Ampofo disclosed that large quantities of drugs had been ordered from the German Democratic Republic to fight Bilharzia. [Text] [Accra DAILY GRAPHIC in English 17 May 82 p 1]

MAN-EATING MICE INVASION--Giant mother mice are reported to have invaded the Isolation Ward for children at the Korle Bu Teaching Hospital in Accra and causing considerable damage to life and property. The mice are said to be feeding on the flesh of the children on admission at the ward at night. Investigations conducted by the 'Times' indicated that some time last week two children lost sizeable portions of their flesh--the work of the mice. In an interview yesterday at the Korle Bu Teaching Hospital, a spokesman said the authorities were aware of the invasion. The spokesman explained that attempts had been made to put the situation under control but the traps being used by the sanitary department were not effective enough. Besides, the mice outnumber the traps available. According to him, the Ministry of Health had been asked to contract a pest control firm to fumigate the whole hospital as was done two years ago. The spokesman recalled that an agreement arrived between the Ministry of Health and a pest control firm two years ago under which the firm was to fumigate the hospital every three months but all of a sudden the whole exercise stopped. [Text] [Accra GHANAIAN TIMES in English 20 May 82 p 3]

CSO: 5400/5624

RECENT TETANUS CASES FOLLOWED; HEPATITIS, MALARIA REPORTED

Athens I VRADYNI in Greek 17 May 82 p 16

[Article by D. Politis]

[Text] Following the tetanus cases, the Piraeus State Hospital in Mikala reported cases of hepatitis, while there is danger of malaria also. These cases increased to the utmost the anxiety of both the hospital personnel and the patients regarding the measures [to be taken].

While the public prosecutor ordered a preliminary investigation about the three tetanus cases in the hospital, two hepatitis cases were reported. Those stricken were nurse Eleni Boudouri who serves in the Second Surgical Clinic and physical therapist I. Paridis who works in the hospital's Neurosurgical Clinic. Boudouri has already recovered while Paridis was transferred to the Communicable Diseases Hospital and now is on recuperative leave.

The two hepatitis cases were again kept carefully secret as in the tetanus cases. The cause of the infection suffered by the nurse and the physical therapist is unknown. The specialists, however, believe that it is not accidental because it has afflicted two persons working in the same area. It is possible that the hepatitis virus was transmitted to both by instruments such as syringes, needles and other objects used in the hospital but which were not well sterilized.

The danger to the Mikala Hospital personnel and patients is considerable, given that the virus remains in the blood 3-4 weeks before the initial symptoms of the disease appear. The incubating period lasts from 60 to 160 days. According to testimony by medical and nursing staff members, the hospital administration has not taken any measures until now for coping with any new cases.

Malaria Too

On the other hand, I VRADYNI has reports that for a week now two alien sailors have been treated in the hospital for malaria symptoms. Both sailors served on the same ship and are being treated in the hospital's First Pathological Clinic.

The hospital's personnel is very perturbed because of all these reported cases which immediately endanger their lives and those of the patients. Staff members characterize as simply symptomatic the fact that no more persons were afflicted by these dangerous and contagious diseases.

7520

CSO: 5400/5325

BRIEFS

RISE IN TUBERCULOSIS INCIDENCE--According to existing data, tuberculosis is once again on the rise in our country, when it was believed to have been "vanquished" for many years. According to our information, the Ministry of Social Services is gathering data in order to determine the extent of the problem and, if necessary, to adopt pertinent measures to confront the situation. [Text] [Athens TA NEA in Greek 2 Jun 82 p 12]

CSO: 5400/5326

INDIA

BRIEFS

GASTROENTERITIS IN MADHYA PRADESH--SEHORE, MP, May 14 (UNI)--The entire Sehore district has been declared gastro-affected after an outbreak of gastro-enteritis claimed 15 lives during the past few days in villages around Nasrullaganj town, 18 km from here. About 190 cases of gastro-enteritis have been reported from the villages so far, according to official sources. [New Delhi PATRIOT in English 15 May 82 p 4]

CSO: 5400/7072

BRIEFS

MALARIA DETECTED IN NEPAL--Ramechhap, June 2--Malaria patients have been found again in four villages of Ramechhap district it is stated by the local malaria office, reports RSS. Malaria 28 persons at Gungsal of Gungsi Bhadaure village panchayat Sangutar Besi of Bankibhera village panchayat, Mugitar of Mugitar village panchayat and Bhirkot and Besitole for Deurali village panchayat. Although the local malaria office claims to have dispatched its officials to the villages for follow-up measures for controlling malaria, the farmers in the village panchayats say that no such workers have been seen here. Malaria was detected here about four weeks ago. Labourers coming from India are learnt to have carried the disease. [Text] [Kathmandu THE RISING NEPAL in English 3 Jun 82 pp 1, 6]

CSO: 5400/5625

BRIEFS

MOSQUITO CONTROL CENTER--Beersheba--A center for the biological control of mosquito infestations has been established at Ben Gurion University here. Malaria, carried by mosquitoes, is a severe problem in many parts of the world, affecting large populations and causing an estimated million deaths annually. Several years ago Dr J. Margalit here isolated an Israeli strain of bacillus thuringiensis, which efficiently decimated mosquito colonies (see INNOVATION 52, March 1980). Later field tests, including extensive work in Kenya under the auspices of the World Health Organization, demonstrated that the same microorganism also is an effective foe of other harmful insect varieties. More recently, B.T. israelensis was tried successfully in many other parts of the world. Because of that experience, the bacillus is now produced by important laboratories in several foreign countries, including France, the U.S.A. and China; in all those places scientists hope to introduce it as a replacement for chemical pesticides. The latter not only have detrimental ecological side effects, but also grow less and less effective as resistant insect varieties develop. The new Ben Gurion U. institute will continue to develop biological methods for mosquito extermination. It is likely that the same basic methods will also be expanded to cover the control of other types of pests. [Text] [Jerusalem INNOVATION in English No 77, Apr 82 pp 1,2]

CSO: 5400/4724

BRIEFS

SEWAGE SYSTEM IMPROVEMENT--Two contracts amounting to \$7.25 million to construct sewerage works in Kingston were signed at the offices of the National Water Commission on Trinidad Terrace, in New Kingston on Friday. McGregor and Levy/Halmer Construction Corporation (a joint venture) signed a \$5.18 million contract while David Chin and Associates Ltd., received a \$2.07 million contract. Work will be carried out in Barbican, Somerset, Sandy Gully, East King's House Road, Eastwood Park Road, Maxfield Avenue and at the Greenwich Sewerage Disposal Works which are to be upgraded. Work is scheduled to begin in July of this year and end in August 1983. After the signing the Minister of Public Utilities, the Hon. Parnell Charles appealed to contractors awarded N.W.C. contracts to do their jobs well as he was "not going to take another South Haven, Washington Gardens type of job." Referring to past experiences when "contractors operate in a manner which pay very little regard to the interests of the public," he said, "This will not be tolerated by this Government or myself as Minister having responsibility for the commission." [Text] [Kingston THE DAILY GLEANER in English 24 May 82 p 1]

CSO: 5400/7558

CHOLERA REPORTED IN SABAH, SARAWAK

Kuala Belait BORNEO BULLETIN in English 8 May 82 p 2

[Excerpt]

SANDAKAN. — A serious outbreak of cholera has hit the Sandakan area claiming two lives.

Earlier this week, 29 cases had been confirmed there since the first case was detected on April 18.

Medical Department statistics show that last week alone there were 21 cases, with 16 in Sandakan District and five in Beluran.

The week also saw the deaths of a six-month-old Bajau boy, Ahmad bin Saralpati, from Sandakan, and a 22-year-old Bugis woman, Hani Maham, from Beluran.

Medical sources said the deaths could probably have been prevented had the victims been brought in earlier for treatment.

◆ Cholera has meanwhile appeared for the

first time this year in Sarawak's Sibu District.

A 58-year-old man from Sungai Lucong was admitted to Sibu General Hospital for treatment late last month.

CSO: 5400/8423

MALAYSIA

BRIEFS

CHOLERA CASES---The outbreak of cholera has claimed one casualty with the death of a fisherman in (Binatar) in the Sixth Division. Another confirmed cholera case and two carriers were reported yesterday, bringing the total of confirmed cases to 23 and carriers to 43. [Text] Kuala Lumpur Domestic Service in English 1130 GMT 20 May 82 BK]

CSO: 5400/2169

MEXICO

BRIEFS

LEPROSY STATISTICS--Mexico City, 8 Jun (NOTIMEX)--Leprosy is reportedly on the rise in this country and according to conservative estimates, some 70,000 Mexicans are already suffering from this disease. In addition, some 15,000 new skin problems caused by parasites, bacterias, viruses and fungi of various types have also been reported in the last 18 months. It has been observed that leprosy cases are more frequent in the states of Michoacan, Guanajuato, Queretaro, Veracruz, Sinaloa, Jalisco and the capital. [FL091445 Mexico City NOTIMEX in Spanish 1331 GMT 8 Jun 82 FL]

CSO: 5400/2168

BRIEFS

MEASLES REPORTED IN WEST JAVA--Jakarta, May 29--A measles outbreak has struck a village in West Java killing 22 children and one adult in just two months, the semi-official newspaper Suara Karya (workers voice) reported today, says AFP. Measles, which is called morbilli locally, infected some 380 children under 12 in the village of Mekarwangi in Garut regency during March and April. The paper said that nutritional deficiencies were blamed for most of deaths and families that have been struck have been issued with financial grants to help them buy food and medicines. [Text] [Kathmandu THE RISING NEPAL in English 30 May 82 p 3]

CSO: 5400/5625

PEOPLE'S REPUBLIC OF CHINA

BRIEFS

SICHUAN LOCAL DISEASE CONTROL—Sichuan Province has done well in preventing and treating local diseases, and the number of patients suffering from diseases such as schistosomiasis, malaria and uncinariasis is now greatly reduced. The provincial CCP committee's leadership group on local diseases recently held a meeting to make arrangements for this year's work. The meeting demanded that all places further strengthen leadership and do well in preventing and treating local diseases. (Yang Xidong), provincial CCP committee deputy secretary and head of the leadership group on local diseases, presided over the meeting. The province now has 11 kinds of local diseases, including schistosomiasis and malaria, which are found in the southern part of the country, and Keshan disease and Kaschin-Beck disease, which are found in the northern part of the country. [Chengdu Sichuan Provincial Service in Mandarin 0030 GMT 11 May 82 HK]

CSO: 5400/2169

MEASLES IMMUNIZATION DRIVE SET FOR CENTRAL LUZON

Manila BULLETIN TODAY in English 29 May 82 p 36

[Text]

MALOLOS, Bulacan
— Regional Director Napoleon Noveno of the Ministry of Health stepped up the measles immunization drive for 50,000 children in Central Luzon.

The campaign which was launched last November had already immunized some 30,000 children in six provinces, it was reported by the health director.

The MOH has adopted a nationwide immunization program patterned after the strategy used by Noveno in conducting the campaign in Region III.

Director Noveno said the immunization against measles is important to children and it would greatly reduced the mortality rate caused by the disease.

He said all health projects are now integrated with the primary health care program to make every community in Central Luzon a better place to live in.

Noveno is not a swivel-chair type of government official and he is spending most of his time in the field overseeing the implementation of the community-based health care plan.

CSO: 5400/5615

PHILIPPINES

BRIEFS

MEASLES IMMUNIZATION DRIVE EXPANDED--Iloilo City--Regional Director Luis Montero of the Ministry of Health has launched an expanded measles immunization campaign by immunizing some 10,000 children in Western Visayas. Health Minister Jesus Azurin has directed the drive to protect small children from the killer disease. All MOH regional offices are conducting the campaign which started from Region III headed by Director Napoleon Noveno. Montero expects to immunize 35 percent of the infant's population in the different provinces, cities and towns of Region VI which is now deeply involved in the implementation of the primary health care program and backed up by the Panay Unified Services for Health (PUSH). Pedro Gaton, health regional training chief, was designated by the regional director to supervise the immunization campaign being undertaken by rural health units. Also, five ranking officials of the regional office were lauded for their exemplary performance in rendering an efficient and selfless service to the people. [Text] [Manila PHILIPPINES DAILY EXPRESS in English 5 Jun 82 p 36]

CSO: 5400/5625

PREVENTION, CURE OF MALARIA DISCUSSED

Johannesburg THE STAR in English 21 May 82 p 19

[Article by Pamela Kleinot: "Malaria Need Not Kill--Expert"]

[Text]

Malaria, a disease transmitted by the anopheles mosquito that kills two million people throughout the world each year, can be prevented or cured completely by drugs.

"There's no excuse for tourists dying from malaria," says Professor Margaretha Isaacson, an expert in tropical diseases.

Her comments follow the deaths of two people in the past two weeks from cerebral malaria.

Both died in Johannesburg hospitals after visiting the Kruger National Park recently.

These deaths come a month after The Star highlighted the various diseases that could be contracted while travelling.

Professor Isaacson, of the South African Institute for Medical Research and the University of the Witwatersrand, stressed the risks of catching malaria by not taking preventive drugs or taking them incorrectly.

She urged people to tell their doctors they had been travelling.

should they have flu-like symptoms afterwards, and warned that malaria could kill if it remained undiagnosed.

Yesterday Professor Isaacson said the Kruger National Park issued warning pamphlets when reservations were made.

She said there were notices at the entrance to the park and behind the reservation desks and in the bungalows was a list of anti-malarial pills available.

The huts were sprayed with insecticides and there were screens on the windows and doors.

"The Department of Health and Parks Board officials do everything possible short of putting a policeman outside your room to push tablets down your throat," she said.

"Tourists need not die from malaria."

Malaria is not confined to the Kruger National Park. Other affected areas include the lowland areas of the Northern Transvaal and Eastern Transvaal, KwaZulu, Northern Natal, Swaziland, Botswana, Zimbabwe, northern Namibia and Malawi.

Professor Isaacson repeated her call for people to take anti-malarial pills when going to these areas.

The tablets should be taken a week before departure, during the visit and for five to six weeks after returning home.

CSO: 3400/5618

BRIEFS

NEW MALARIA APPEAL--The Health Department has again appealed to people to take medical precautions before visiting malaria areas following the death last week of a Kruger National Park official. Mr Pieter Steenkamp (36) died shortly after being admitted to the Rob Ferreira Hospital in Nelspruit last Monday. The cause of his death was diagnosed as malaria. Health authorities said a haemorrhagic complication had set in. According to newspaper reports, he was prevented from taking anti-malaria tablets because of a major operation several years ago. A Health Department official said in Pretoria yesterday anti-malaria medication produced few contraindications. But if people were affected by the tablets they should consult their doctors and preferably not visit areas where they risked contracting malaria. [Text] [Johannesburg THE CITIZEN in English 3 Jun 82 p 11]

CSO: 5400/5616

BRIEFS

WARNING ON JAPANESE-TYPE ENCEPHALITIS--A nationwide warning against a Japanese-type encephalitis was issued yesterday by the Ministry of Health and Social Affairs. The measure immediately followed the appearance of culex mosquitoes, known as the main source of the summer disease, in the southern provinces. The culex mosquitoes--smaller in size than ordinary mosquitoes and red in body--made their appearances this year about 12 days earlier than last year, the ministry spokesman said. The mosquitoes were found yesterday in three southern areas Kimhae, Kyongsang Nando; Kwangju, Cholla Nando and Wanjū, Cholla Pukto. The ministry also ordered provinces and cities to take thorough precautionary steps against the possible outbreak of summer epidemics. The Japanese-type encephalitis, with a high rate of fatality and severe after-ill effects, is symptomized by high fever and headaches, ministry officials said. Severe cases of the disease fall into a coma accompanied by convulsions, during the critical period of the disease, they noted. The ministry advised every household to take precautionary measures by inoculating their children between three and five years of age against the disease. Last year a total of 194 people were stricken by the disease, of whom nine died, they said. [Text] [SK150037 Seoul THE KOREA HERALD in English 15 Jun 82 p 8]

CSO: 4120/296

BRIEFS

DIARRHEA IN SOUTH SRI LANKA--Steps have been taken to control the spread of diarrhoea in the Moneragala District. The Moneragala Health Office has taken prompt action to stop this epidemic. Those affected in the Siyambalanduwa Ethimale, Mariarawa and Kolladeniya areas are being admitted to the Moneragala and Badulla hospitals for treatment. Advice is also being given on the use of latrines and boiled water. Action has been taken to chlorinate a water in wells ponds and other sources from where water is taken for drinking purposes. [Text] [Colombo THE ISLAND in English 29 May 82 p 3]

CSO: 5400/5617

CHOLERA-RELATED BAN ON SA VEGETABLES, FRUITS BREEDS SMUGGLING

Mbabane THE SWAZI OBSERVER in English 29 May 82 p 4

[Editorial: "Fruits on Market"]

[Text]

WHEN the cholera epidemic hit Swaziland in the middle of last year the Government issued a strong warning and banned the importation of vegetables and fruits from South Africa.

It was made clear that this action was taken to avoid the cholera disease from spreading. This order also included many uncooked foodstuffs which, under previous conditions to the cholera epidemic, crossed the two borders.

Under this order police were instructed to enforce the law on those found contravening order. It is a known fact that before the cholera epidemic hit Swaziland, Swazis enjoyed the benefits of importing any vegetable or fruit that was on sale on the South African markets.

Although the list of fruits which were available is rather too long to innumerate the main that Swazis had access to were apples, grapes, peaches, pears, plums and mangoes, depending on the season.

Soon after the banning order was made, the country was subjected to serious shortages and soaring prices of onions, cabbages and tomatoes. Life began to go back to normal when our local farmers realised that the task of providing these foodstuffs was in their hands instead of the South Africans.

Somehow, the law appears to have laxed because apples and other fruits on the banning list have been seen around the local markets recently. At first, this was conducted in hush-hush tones by the market vendors. The first day it hit, one would have thought it was drug-pushing, highlighted by whispers and pats on the shoulder.

We are informed that the banning order has not yet been lifted.

We feel a clear-cut policy statement over this is needed: whether the banning order remains or is lifted. We feel that as long as the ban is not fully enforced, contraband racketeers will continue profiteering.

People will never stop buying these smuggled goods because they are used to them and they need them. For instance, nothing will stop anyone buying a bunch of the choicest grapes on the market at E2 which, under normal circumstances, would cost 50 cents.

CSO: 5400/5623

CHIEF MEDICAL OFFICER SAYS DYSENTERY DECLINING IN ZANZIBAR

Dar es Salaam DAILY NEWS in English 1 Jun 82 p 3

[Article by Abdallah Yakuti]

[Text]

At least 28 people have died and eight others are receiving treatment at Zanzibar's V.I. Lenin Hospital since the dysentery epidemic broke out in the Island in March, this year.

The Hospital's Chief Medical Officer, Dr. Athanas, told the President of Zanzibar, Ndugu Aboud Jumbe, that the disease was at present on the retreat.

Dr Athanas had gone to the State House in Zanzibar to brief Ndugu Jumbe on the progress to eliminate the disease. He said the number of deaths could be higher if those who had died in homes were also accounted for.

He explained that of the 502 people admitted at the hospital for treatment between April and May this year, 28 of them had since died. He said 327 others had been released after treatment and that at present only 80 patients were at the hospital undergoing treatment.

Most of the victims who were taken to the hospital in time had recovered, but those who were admitted during the terminal stages of the disease died he said.

He added that it was important for the Government and the Party at district and village levels to educate the public on the need to send to

hospital as quickly as possible relatives who caught the disease instead of waiting until the victims were in a critical condition.

Dr. Athanas told Ndugu Jumbe that medical authorities in Zanzibar would continue to admit dysentery patients in isolation wards to contain the spread of the epidemic.

It is understood that many people prefer to nurse their sick relatives at home rather than sending them to hospitals because when the patients are admitted the relatives are denied permission to visit them.

He said the condition to isolate patients was intended to protect healthy relatives from getting the disease from the victims admitted in the hospitals.

Dr. Athanas also warned the public against depending on boiled clove or tea solutions. He said there were enough supplies of drugs in all the government hospitals for treating dysentery.

Although Pemba island has not been so much affected by the disease, yet the Ministry of Health does not intend to take any chances. It has already dispatched a medical team complete with equipment and drugs to Pemba to stand by.

BRIEFS

DYSENTERY EPIDEMIC--An epidemic of dysentary has broken out in (Kavongo) parish, (Hoima) District. The sub-county chief of the area, Mr (Kanyanyani Kasipia) told a UGANDA NEWS AGENCY correspondent in (Homa) town that at least 2 people are dying every day. Several victims of the epidemic have been admitted in (Hoima) hospital. Arrangements are being made to send a vaccination team to the area. [Text] [EAL31404 Kampala Domestic Service in English 1000 GMT 13 May 82]

CSO: 5400/5621

CENTRAL COMMITTEE MEMBER SAYS CHOLERA OUTBREAK UNDER CONTROL

Lusaka TIMES OF ZAMBIA in English 28 May 82 p 1

[Text]

SEVEN people have died in Chief Puta's area in Nchelenge district of Luapula Province and 70 cases reported since the recurrence of Cholera last month, Member of the Central Committee for the area Mrs Mary Fulano confirmed in Mansa yesterday.

The worst hit area is Chipungu near Mpweto, a Zairean border village in Shaba province where more than 500 cases have been reported and 50 people killed.

But Mrs Fulano, who has just returned from a tour of the area said in a telephone interview that the disease was "under control" and medical personnel were doing their best to contain it.

There had been no fresh cases of the killer disease since she visited Chipungu last Friday.

The outbreak was caused by the free movement of villagers between Zaire and Zambia.

Chipungu and Mpweto are separated by a river which the villagers crossed at will.

Villagers from Mpweto crossed to Chipungu because of free medical services offered in Zambia which they had to pay for in Zaire.

Principal health assistant for the province Mr Kenneth Mutono said in Mansa a team of medical staff was vaccinating villagers and roadblocks had been mounted to prevent the free movement of the people in the area.

"The disease will be eradicated because Chipungu is in an isolated area," he said.

Most Zaireans who came to the village used Zambian names and villages to get medical treatment and that made it difficult for health authorities there because any case reported was taken to be Zambian when in some cases it was not.

There were "also a lot of inter-marriages" which helped to increase contacts between the two villages.

Mr Mutono said some measures had been taken to ensure that the disease did not spread to other villages. These include the mounting of roadblocks manned by health officials and police officers. Intensive health education for the villagers and immunisation of people by giving them tetracycline had been stepped up.

A team of ten medical staff, five medical assistants and five health assistants was manning the four health clinics that had been set up.

And Mrs Fulano has urged the Government to help improve the water supply in the province.

The problem was serious and needed urgent attention. Villages in Chief Puta's area want piped water.

"We are doing everything possible to improve the situation, but the Government should come in and help."

Mrs Fulano said transport problems were serious in villages near lakes Bangweulu and Mweru where Zambians shared boats with Zaireans. The Zambians had to pay for their rides on Zairean boats in Zairean currency.

"The Zambian currency is of no value on the islands and the villagers have no use for it."

GERMAN DEMOCRATIC REPUBLIC

BRIEFS

FOOT-AND-MOUTH DISEASE--According to the Ministry of Agriculture, Forestry and Foodstuffs, the closure due to foot-and-mouth disease of the Zingst Peninsula of the Ribnitz-Damgarten Kreis and the partial closure of the F 105 in the Karnin area will be lifted on 28 May 1982. On this date travels to the Zingst area will be possible, but Darss including Prerow, Wieck and Born will still be closed to travelers. [East Berlin NEUES DEUTSCHLAND in German 27 May 82 p 2 AU]

CSO: 5400/2169

BRIEFS

VETERINARY MEDICINES CONSIGNMENTS--The second consignments of veterinary medicines worth 17.2m/- ordered recently by the Ministry of Livestock Development is expected to be delivered soon. The Ministry's Assistant Director for Animal Health, Dr S.R. Magenbe, said yesterday that the consignment would mainly consist of medicines for cattle and chicken diseases. He said that the first consignment which comprised medicines for dog diseases was delivered in the country about two weeks ago. Dr Magenbe said the medicines which were bought through grants from Norway and Germany would alleviate the current shortage. [Text] [Dar es Salaam DAILY NEWS in English 4 Jun 82 p 3]

CSO: 5400/5626

URUGUAY

BRIEFS

OUTBREAK OF HYDATIDOSIS—The outbreak of hydatidosis disease in Rio Negro Department has led to a campaign to keep it from spreading. According to a report on this problem, of 3,940 slaughtered animals 1,725 were found infected. [Montevideo El Espectador Network in Spanish 1600 GMT 19 May 82 PY]

CSO: 5400/2169

BRIEFS

SALE OF VETERINARY MEDICINE--The Council of Ministers Chairman has issued a resolution clearly stating that: In order to create conditions for heightening the output, quality and economic effect of the production and utilization of veterinary vaccines along with implementing the policy on annulling the supply system so as to decrease state budget expenditure, starting 1 June 1982 veterinary vaccines will be sold to the state-operated animal husbandry sector, to collective zones, and to families at state price. In order to decrease vaccine prices, starting June 1982 the state will exempt veterinary medicine manufacturing installations from state taxes on vaccines. Pending new prices, vaccines are to be sold at the current prices set by the Ministry of Agriculture. Regarding the districts in mountain areas where the people are not educated enough to assimilate technological advances and where livestock vaccination has not become a demand or habit, the province people's committees must base themselves on the concrete conditions in deciding to give veterinarian vaccines free for about three years at the cost supplied by local budgets. The Ministry of Agriculture is responsible for directing veterinary medicine manufacturing installations in increasing output and quality, in decreasing cost, and in supplying enough proper vaccines in a timely manner, and for developing vaccine selling to and vaccine use in animal husbandry installations and families along with cooperating with the Ministry of Finance in guiding the localities in seriously implementing the policy on selling veterinary vaccines. [Text] [Hanoi NHAN DAN in Vietnamese 7 May 82 p 4] 8418

CSO: 5400/5605

BRIEFS

NOOGOORA BURR OUTBREAK--A serious outbreak of noogoora burr--a plant that could cost WA sheep men millions of dollars--has been found in the Kimberleys. The discovery was made by an Agriculture Protection Board officer who found that it extended 16km along the Fitzroy River. There are fears that the infestation--the third found in WA--could spread 600km along the river to the sea. Noogoora burr is a serious problem in northern NSW and Queensland. It can be spread easily. The APB's chief officer, Mr Neil Hogstrom, said yesterday that the burrs, covered with hooked spines, could become entangled in wool, reducing the value of the wool clip by many millions of dollars. Noogoora burr was also poisonous in its early stages. Some of the plants found were up to 1.5m and bearing seeds. Staff were still searching the area for further infestations and residents were asked to report any suspicious-looking plants to the board. "We are asking visitors to take particular care and not pick up and spread the hooked burrs round the State," he said. Mr Hogstrom said that noogoora burr was a native of North America. Plants were first found in Queensland in 1860. The two other outbreaks in WA were near Perth and the lower Ord River. Both areas had been quarantined and were being eradicated. [Perth THE WEST AUSTRALIAN in English 8 May 82 p 11]

CSO: 5400/7557

PALAWAN, NEARBY ISLANDS QUARANTINED AGAINST RICE BUG

Manila PHILIPPINES DAILY EXPRESS in English 6 Jun 82 p 2

[Text]

PALAWAN and nearby islands have been placed under quarantine to prevent the spread of a dangerous pest attacking rice plants.

Agriculture Minister Arturo R. Tanco Jr. said yesterday the pest, known as the rice black bug, was detected recently by the Bureau of Plant Industry.

The bug is known to exist only in the Palawan Islands, which include Palawan, Cagayan de Sulu, and Cagayan Island, Tanco said.

TANCO banned the "movement transfer or carrying of rice plants" from Palawan, except when accompanied by permits from BPI Director Domingo Panganiban or his representative.

The quarantine order also prohibits the transport of plants belonging to the family *Graminae*, known to be the host plants of the black bug.

These steps will ensure protection of the rice industry from the spread

of the bug, and will preserve the gains of the Masagana 99 programs, Tanco said.

He stressed that any person who violates the order may be imprisoned or fined up to P20,000.

Panganiban said yesterday a BPI team has been sent to Palawan to determine the extent of damage to crops and the possible solutions.

• • •

IN ANOTHER development, the National Food and Agricultural Council warned yesterday participating fertilizer dealers in the RP-Japan Food Production Program against using collection remittances for personal business.

The NFAC said that some dealers have failed to turn over the collections to the Planters Products Inc. district warehouse and instead have used the money for their own business.

These dealers face strict punishments, the NFAC said —CC

CS0: 5400/5625

GRAIN BORER CONTROL SEMINAR

Dar es Salaam DAILY NEWS in English 31 May 82 p 1

[Text]

A seminar-cum-training workshop is scheduled to open in Nsaga today over ways of effectively controlling the Greater Grain Borer which has been damaging stored grain in five regions in the country.

Telephone contact with Nsaga was difficult from Dar es Salaam yesterday and by the time we went to press, it was not confirmed as to who would open the six-day workshop scheduled to end on June 5.

But a Ministry of Agriculture official confirmed yesterday that resource persons from the Ministry's Headquarters had travelled to Nsaga for the seminar which has been financed by the United States Agency for International Development (USAID).

The Greater Grain Borer,

alias *Prostephanus truncatus* and *Scania*, is attacking stored maize in Tabora, Shinyanga, Mwanza, Morogoro and Rukwa regions. Infestation in Rukwa was recently reported in Mpanda District.

Agricultural extension officers, particularly those dealing with produce inspection and crop storage as well as peace corps working on village storage in the country, would attend the Nsaga meeting.

Various experiences in fighting the beetle, a known pest of storage maize in the US and Central America, would be discussed during the seminar.

Scania was first reported in Tabora last year, the first known infestation of the pest in Africa.

CSO: 5400/5622

VIETNAM

BRIEFS

INSECT INFESTATION--According to the Vegetation Protection Department (Ministry of Agriculture), in Nghe Tinh, Vinh Phu, Ha Bac and Ha Son Binh provinces, in Hai Phong City...many highly concentrated pockets of brown planthoppers have appeared among the early fifth-month and spring rice crops with small-scale disasters in some areas. Brown planthoppers can cause large-scale disasters in the near future. The Ministry of Agriculture reminds the Northern provinces and cities of careful ricefield inspections and of organizing brown planthopper eradication in time. [Text] [Hanoi NHAN DAN 6 May 82 p 4] 8418

CSO: 5400/5605

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